SERIAL NO. FILING DATE MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) APPLICANT(S) 10/018904 CLAIMS AFTER 1st AMENDMENT AFTER 2md AMENDMENT AS FILED IND. DEP. IND. DEP. IND. DEP. DEP. IND. DEP. IND DEP. 2 3 !4 ?7 :9 .1 :2 .3 TAL TOTAL TAL TOTAL DEP. AL MAY BE JED FOR ADDITIONAL CLAIMS OR AMENDMENTS VIS. DUPARTMENT OF COMMERCE POUNT ON THE POUNT ON

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